AMENDMENTS TO THE SPECIFICATION

Please replace the paragraph set forth on page 1, lines 7-10 with the following rewritten paragraph:

--This application is a continuation-in-part of U.S. Patent Application Serial No. **10/045,816**, filed on October 25, 2001, entitled "Gastric Retentive Oral Dosage Form with Restricted Drug Release in the Lower Gastrointestinal Tract" (inventors Bret Berner and Jenny Louie-Helm), the disclosure of which is hereby incorporated by reference.--

Please replace the paragraph set forth at page 34, lines 7-27 with the following rewritten paragraph.

--The dosage forms of the present invention are particularly useful for delivering drugs directly into the stomach for an extended period of time, for example, when the drug is preferentially absorbed in the small intestine (e.g., ciprofloxacin), or for providing continuous, local-only (non-systemic) action, for example, when the drug is calcium carbonate, and which when incorporated into the dosage forms of the present invention becomes a non-systemic, controlled-release antacid. The dosage forms are also useful for delivering drugs continuously to the stomach that are only soluble in that portion of the gastrointestinal tract. For instance, the dosage forms of the present invention are useful for the delivery of calcium carbonate or other calcium salts intended to be used as an antacid or as a dietary supplement to prevent osteoporosis. Calcium salts are soluble in the stomach but not in the remainder of the G.I. tract, as a result of the presence of stomach acid. With conventional dosage forms, the [[dwell]] **swell** time of the delivered agent in the stomach is limited usually to only about 20 to 40 minutes, which, in turn, results in a calcium availability of only about 15 to 30%. As a consequence, extremely large dosage forms (2.5 grams), which are difficult for patients to swallow, are commonly utilized. In contrast, by providing controlled delivery for about 4 to 9 hours, plus gastric retention of from about 2 to 12, preferably 4 to 9 hours, most preferably about 4 to 6 hours, the dosage forms of the present invention assure more complete bioavailability of elemental calcium from the administered drug, i.e., calcium carbonate. This results in a greater likelihood of patients receiving the intended dose and, also, avoids the need for impractically large dosage forms.--